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Chapter you are filing under:	
☐ Chapter 7	
☐ Chapter 11	
☐ Chapter 12	
Chapter 13	☐ Check if this an amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Roddrika First name	_	First name
		Middle name	_	Middle name
	Bring your picture identification to your meeting with the trustee.	Heard Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3920		

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Case number (if known)

Debtor 1 Roddrika Heard

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		2108 Clover Court Plainfield, IL 60585	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Will	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
ò.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Roddrika Heard

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7							
	choosing to file under								
		☐ Cha	apter 11						
		☐ Cha	apter 12						
		■ Cha	apter 13						
8.	How you will pay the fee		about how yo	ou may pay. Typically, if you attorney is submitting your	are paying	the fee yourself,	you may pay with cash	r local court for more details i, cashier's check, or money in a credit card or check with	
				the fee in installments. If e in Installments (Official Fo		e this option, sign	and attach the Applica	ation for Individuals to Pay	
			•	nt my fee be waived (You m	,	this option only i	f vou are filing for Char	oter 7. By law, a judge may.	
		k a	out is not req applies to you	uired to, waive your fee, and	d may do so nable to pa	o only if your inco y the fee in install	me is less than 150% of ments). If you choose	of the official poverty line that this option, you must fill out	
9.	Have you filed for bankruptcy within the last 8 years?	☐ No. ■ Yes							
	·			Northern District of					
			District	Illinois	When	12/13/11	Case number	11-49871	
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No							
	annate:		Debtor				Relationship to y	/OU	
			District		When		Case number. if		
			Debtor				Relationship to y	-	
			District		When		Case number, if	known	
11.	Do you rent your	■ No.	Go to I	ine 12.					
	residence?	☐ Yes	Has vo	our landlord obtained an evid	ction judam	ent against vou a	nd do you want to stav	in your residence?	
		00		No. Go to line 12.	. 0	3 ,	,	•	
			_						

Debtor 1	Roddrika Heard	Document	Page 4 01 52	Case number (if known)	

Part	Report About Any Bu	sinesses	You Owr	as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Stat	e & ZIP Code			
it to this petition. Check the appropriate box to describe your business:			x to describe your business:					
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you			s. If you ir s, cash-f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	Iam	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am i	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	■ No.	If immed	the hazard? diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code			

Debtor 1 Roddrika Heard Document Page 5 of 52 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate

in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 52 Case number (if known) Debtor 1 Roddrika Heard Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571 /s/ Roddrika Heard Roddrika Heard Signature of Debtor 2 Signature of Debtor 1

Executed on

Executed on

MM / DD / YYYY

December 17, 2015

MM / DD / YYYY

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Debtor 1 Roddrika Heard Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John P.	Carlin	Date	December 17, 2015
Signature of	Attorney for Debtor	-	MM / DD / YYYY
John P. Ca	rlin		
John Carlin	1		
1305 Remi	ngton Road		
Suite C			
	rg, IL 60173		
Number, Street,	City, State & ZIP Code		
Contact phone	847-843-8600	Email address	jcarlin@changandcarlin.com
6277222			
Bar number & St	ate		

		17(7(.1111)	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Roddrika Heard			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				- Objects (Cityle See
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	22,300.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	24,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	12,340.00
	Your total liabilities	\$	36,340.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,977.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,417.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
 7. 	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you Yes What kind of debt do you have?	ur other sch	nedules.
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Roddrika Heard Document Page 9 of 52
Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

\$______2,999.83

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Document Page 10 of 52 Fill in this information to identify your case and this filing: Debtor 1 Roddrika Heard First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one. 3 1 Make: the amount of any secured claims on Schedule D: Camero Creditors Who Have Claims Secured by Property. Model: Debtor 1 only Year: 2014 Debtor 2 only Current value of the Current value of the Approximate mileage: 25000 ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$21,000.00 \$21,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$21,000.00 you have attached for Part 2. Write that number here.....>> Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Roddrika He	ard		Document	————	Case num	ber (if known)	
■ Yes.	Describe	Misc use	ed household	d goods				\$900.00
7. Electro Examp ■ No	les: Televisions a			tereo, and digital eq a players, games	uipment; comput	ters, printers, scan	ners; music co	ellections; electronic devices
3. Collect	Describe ibles of value	d figurines: r	naintings print	s or other artwork:	hooks nictures (or other art objects	s: stamp, coin	or baseball card collections;
■ No			rabilia, collecti		ocoko, pioturco, k	or other art objects	, stamp, som,	
Examp	les: Sports, photomusical instruction	ographic, ex		her hobby equipmer	nt; bicycles, pool	tables, golf clubs,	skis; canoes a	nd kayaks; carpentry tools;
0. Firear Exam	ms	es, shotguns	ammunition,	and related equipm	ent			
□ No	<i>pl</i> es: Everyday c	lothes, furs,	leather coats,	designer wear, sho	es, accessories			
■ Yes.	Describe	used clo	thing					\$300.00
■ No		ewelry, costu	ume jewelry, e	ngagement rings, w	edding rings, hei	rloom jewelry, wat	ches, gems, go	old, silver
Exam ■ No	arm animals ples: Dogs, cats,	, birds, horse	98					
14. Any o t ■ No	Describe ther personal ar Give specific in		-	did not already list	, including any	health aids you d	lid not list	
		-		m Part 3, including	-		attached	\$1,200.00
Part 4: De	escribe Your Fina	ncial Assets						
Do you o	wn or have any	legal or equ	uitable interes	st in any of the folk	owing?			Current value of the portion you own? Do not deduct secured claims or exemptions.
l6. Cash Exam ■ No	<i>ples:</i> Money you	have in you	ır wallet, in you	ur home, in a safe de	eposit box, and o	n hand when you	file your petition	n

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Case number (if known) Document Debtor 1 Roddrika Heard 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... 17.1. JP Morgan Chase \$100.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Pension Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

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Case number (if known) Debtor 1 Roddrika Heard Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No ■ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: Term life insurance through employer - no \$0.00 current cash value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$100.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

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Case number (if known) Document Debtor 1 Roddrika Heard 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$21,000.00 Part 3: Total personal and household items, line 15 \$1,200.00 Part 4: Total financial assets, line 36 \$100.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$22,300.00

Official Form 106A/B Schedule A/B: Property page 5

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$22,300.00

\$22,300,00

	Ouc	JC 10 42007 E	Document Document	Р	age 15 of 52	J.00 D ■	COO MAIN
Fi	II in this informa	ation to identify your	case:				
De	ebtor 1	Roddrika Heard					
De	ebtor 2	First Name	Middle Name	La	st Name		
	pouse if, filing)	First Name	Middle Name	La	ist Name		
Ur	nited States Banl	cruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINC	DIS		
Ca	ase number						
(if I	known)						Check if this is an amended filing
0	fficial For	m 106C					
S	chedule	C: The Pro	operty You Cla	im	as Exempt		12/15
the cas For spe any fun	e property you list eded, fill out and se number (if kno r each item of p ecific dollar ame y applicable sta nds—may be un emption to a pal	ed on Schedule A/B: F attach to this page as i wn). roperty you claim as o ount as exempt. Alter tutory limit. Some exe limited in dollar amount rticular dollar amount	Property (Official Form 106A/B) many copies of Part 2: Addition exempt, you must specify the natively, you may claim the fuemptions—such as those for unt. However, if you claim an	as you nal Pag e amo ull fair healtl exem	ner, both are equally responsible four source, list the property that you ge as necessary. On the top of any unt of the exemption you claim. It market value of the property be a aids, rights to receive certain by ption of 100% of fair market value termined to exceed that amount	claim as ex additional p One way of ing exempt penefits, and the under a li	empt. If more space is pages, write your name and doing so is to state a ed up to the amount of d tax-exempt retirement aw that limits the
	art 1: Identify	the Property You Cla	im as Exempt				
1.	Which set of e	exemptions are you cl	laiming? Check one only, ever	n if you	ur spouse is filing with you.		
	You are clai	ming state and federal	nonbankruptcy exemptions. 1	11 U.S	.C. § 522(b)(3)		
	☐ You are clai	ming federal exemption	ns. 11 U.S.C. § 522(b)(2)				
2.	For any prope	rty you list on Schede	ule A/B that you claim as exe	mpt, f	ill in the information below.		
		n of the property and line at lists this property	e on Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Scriedule A/B ti	iat lists this property	Copy the value from Schedule A/B	Ched	ck only one box for each exemption.		
		usehold goods	\$900.00		\$50.00	735 ILC	S 5/12-1001(b)
	Line from Sche	edule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	used clothing		\$300.00		\$300.00	735 ILCS	S 5/12-1001(a)
	Line from Sche	edule A/B: 11.1		_	<u>-</u>		
					100% of fair market value, up to any applicable statutory limit		
	Pension Line from Sche	odulo A/P: 21 1	Unknown		100%	735 ILC	5 5/12-1006
	Line nom Sche	aule A.B. 2111			100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adju ■ No	ustment on 4/01/16 and	, ,	ises fil	ed on or after the date of adjustme	,	

Yes

Cas	se 15-42007	Document	Page 16	1 12/17/15 17.4 of 52	9.09 Desc IV	iaiii
Fill in this inform	ation to identify you			(11.)/		
Debtor 1	Roddrika Heard					
Debior 1	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the	: NORTHERN DISTRICT OF ILL	INOIS			
Ormod Glatos Barr	inapier Court for the					
Case number					□ Check	if this is an
			,			led filing
Official Form	106D					
		Who Have Claims	Sacurad	by Property	,	12/15
ochedule i	J. Creditors	WITO Have Claims	Jecui eu	by Froperty		12/13
		If two married people are filing togethe out, number the entries, and attach it t				
number (if known).						
	nave claims secured by	,, , ,	- de dede - Ma	b.aa.a.db.ta.a.ala.a.da	managed and their faces	
		his form to the court with your other	schedules. You	u have nothing else to	report on this form.	
■ Yes. Fill in	all of the information	below.				
Part 1: List All	Secured Claims			0-1	Oakima D	Only many O
		more than one secured claim, list the cre		Column A	Column B	Column C
		s a particular claim, list the other creditors ical order according to the creditor's nam		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Gateway Fi	nancial	Describe the property that secures t	he claim:	value of collateral. \$24,000.00	\$21,000.00	If any \$3,000.00
Creditor's Name		2014 Chevrolet Camero 25000		Ψ2 1,000.00	Ψ21,000.00	Ψο,σσσ.σσ
			,			
		As of the date you file, the claim is:	Check all that			
PO Box 32		apply.	Shook all that			
Saginaw, M		Contingent				
Number, Street,	City, State & Zip Code	Unliquidated				
Who owes the deb	ot? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as r	mortgage or secu	ıred		
Debtor 2 only		car loan)				
☐ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this cla	im relates to a	Other (including a right to offset)				
Date debt was incu		Last 4 digits of account numb	per 1145			
Date debt was med	2014		1140			
					1	
	•	column A on this page. Write that numl the dollar value totals from all pages.		\$24,000		
Write that number		the donar value totals from an pages.		\$24,000	0.00	
Part 2: List Other	ers to Be Notified fo	or a Debt That You Already Listed				
		e notified about your bankruptcy for a				
trying to collect from	m you tor a debt you o or any of the debts that	we to someone else, list the creditor in t you listed in Part 1, list the additional	n Part 1, and the l creditors here.	en list the collection age If you do not have addi	ency here. Similarly, if y itional persons to be no	you have more otified for anv
debts in Part 1, do i	not fill out or submit th			,		,
Name Add	ress	-				
-NONE-		O	n which line	in Part 1 did you e	enter the creditor?	•

Last 4 digits of account number

		Document	<u>Page</u>	17.01.52			
Fill in t	this information to identify your ca	ise:					
Debtor	1 Roddrika Heard						
	First Name	Middle Name	Last Name				
Debtor (Spouse i		Middle Name	Last Name				
		NODTHERN DISTRICT OF ILL					
United	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS				
Case n							
(if known))				_	eck if this i	
					ame	ended filin	g
Offic	ial Form 106E/F						
	edule E/F: Creditors \	Nho Have Unsecui	red Cl	aims			12/15
ny exec schedule schedule eft. Atta ame an	omplete and accurate as possible. Use cutory contracts or unexpired leases the G: Executory Contracts and Unexpire D: Creditors Who Have Claims Secur ch the Continuation Page to this page. Id case number (if known).	nat could result in a claim. Also lised Leases (Official Form 106G). Do red by Property. If more space is n If you have no information to repu	st executor o not includ leeded, cop	y contracts on Schedule A/B: Prop de any creditors with partially secu by the Part you need, fill it out, num	erty (Official lared claims the laber the entries	Form 106A at are liste es in the bo	VB) and on ed in oxes on the
Part 1:							
1.	Do any creditors have priority unsecur	ed claims against you?					
	No. Go to Part 2.						
	Yes.						
Part 2:	List All of Your NONPRIORITY	Unsecured Claims					
3.	Do any creditors have nonpriority unse	cured claims against you?					
	■ No. You have nothing to report in this	part. Submit this form to the court wi	ith your othe	er schedules.			
	■ Yes.						
1	List all of your nonpriority unsecured of unsecured claim, list the creditor separate more than one creditor holds a particular Page of Part 2.	ely for each claim. For each claim list	ted, identify	what type of claim it is. Do not list cla	aims already in Ired claims fill (ncluded in F	Part 1. If ntinuation
4.1	A/R Concepts, Inc.	Look A digito of accoun		194			705.00
	Priority Creditor's Name	Last 4 digits of accour	it number	104	_	\$	
	18-3 E. Dundee Road Suite 330 Barrington, IL 60010	When was the debt inc	curred?	2015	_		
	Number Street City State Zlp Code	As of the date you file,	, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	□ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and anoth	her Type of NONPRIORITY	unsecure	d claim:			
	☐ Check if this claim is for a commodebt	unity					
	Is the claim subject to offset?	Obligations arising on ot report as priority clain		aration agreement or divorce that you	did		
	No	☐ Debts to pension or	profit-sharir	ng plans, and other similar debts			
	Yes	Other. Specify	collect	ion			
4.2	Adventist Health Partners	Last 4 digits of accour	nt number	8624		\$	20.00
	Priority Creditor's Name PO Box 7001	When was the debt inc	curred?	2015	_		
	Bolingbrook, IL 60440 Number Street City State Zlp Code	 As of the date you file,	. the claim	is: Check all that apply			
		, , ,					

Debto	Case 15-42607 Doc 1	Filed 12/17/15 Entered 12/17/15 17:49:09 Document Page 18 of 52 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical Bill		
4.3	Adventist Hinsdale Hospital	Last 4 digits of account number 544	\$	77.00
	Priority Creditor's Name PO Box 9247	When was the debt incurred? 2014		
	Hinsdale, IL 60522 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify medical bill		
4.4	advocate lutheran general	Last 4 digits of account number 5544		1,667.00
	Priority Creditor's Name			·
	175 dempster st Park Ridge, IL 60068	When was the debt incurred? 2014		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated		
		<u> </u>		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	<u> </u>		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify medical bill		
4.5	Advocate Medical Group	Last 4 digits of account number 5544	\$	386.00
J	Priority Creditor's Name 75 Remittance Dr. Suite 1019 Chicago, IL 60675	When was the debt incurred? 2015	-	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

Official Form 106 E/F

Debtor	1 Roddrika Heard	Document Page	Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	□ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt				
	Is the claim subject to offset?	☐ Obligations arising out of a sent not report as priority claims	paration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-shar	ing plans, and other similar debts		
	☐ Yes	Other. Specify media	cal bill	_	
4.6	Arnold Scott Harris PC	Last 4 digits of account number	5741	\$	0.00
	Priority Creditor's Name 222 Merchandise Mart Suite 1932	When was the debt incurred?	2015		
-	Chicago, IL 60654 Number Street City State Zlp Code	As of the date you file, the clain	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	·			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sent not report as priority claims	paration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-shar	ing plans, and other similar debts		
	Yes	Other. Specify notice	9	_	
4.7	City of Chicago- Dept of Rev		· 1148		1,020.00
	Priority Creditor's Name	Last 4 digits of account number	1140	\$	1,020.00
	PO Box 88292	When was the debt incurred?	2015		
	Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the clain	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	· ·			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a send not report as priority claims	paration agreement or divorce that you did		
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts		
	Yes	Other. Specify ticket			
4.8	CMRE Financial Services, Inc.	Last 4 digits of account number	. 5511	\$	1,150.00
	Priority Creditor's Name 3075 E. Imperial Hwy #200	When was the debt incurred?	2015		

Brea, CA 92821 Number Street City State Zlp Code

As of the date you file, the claim is: Check all that apply

Debtor	Case 15-42607 Doc 1 Roddrika Heard			red 12/17/15 17:49:09 20 of 52 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY u	unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	☐ Obligations arising out not report as priority claim		aration agreement or divorce that you did		
	■ No	☐ Debts to pension or pr	ofit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify	collect	ion for West Suburban Medical		
	Elmhurst Emergency Med Srvs	Last 4 digits of account	number	5544	\$	23.00
	Priority Creditor's Name PO Box 366	When was the debt incu	rred?	2015		
	Hinsdale, IL 60522 Number Street City State Zlp Code	As of the date you file, the	he claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	cogo				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY u	unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising out		aration agreement or divorce that you did		
	No	Debts to pension or pr	ofit-sharin	g plans, and other similar debts		
	Yes	Other. Specify	Medica	al Bill		
4.1	Elmhurst Memorial Healthcare	Last 4 digits of account	number	1544	\$	55.00
	Priority Creditor's Name PO Box 92348	When was the debt incu	rred?	2015		
	Chicago, IL 60675 Number Street City State Zlp Code	As of the date you file, the	he claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	J				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY U	unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising out		aration agreement or divorce that you did		

4.1 Healthlab

Priority Creditor's Name

Other. Specify

lacksquare Debts to pension or profit-sharing plans, and other similar debts

medical bill

Last 4 digits of account number 855 \$ 25.00

■ No
□ Yes

Case 15-42607 Entered 12/17/15 17:49:09 Doc 1 Filed 12/17/15 Desc Main Page 21 of 52 Case number (if know) Document Debtor 1 Roddrika Heard 25 N. Winfield Rd. When was the debt incurred? 2015 Winfield, IL 60190 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes medical bill Other. Specify 4.1 Ilinois Dept. of Revenue 5655 0.00 Last 4 digits of account number \$ Priority Creditor's Name 100 W. Randolph st When was the debt incurred? 2014 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes notice only Other. Specify 4.1 0.00 Illinois Collection Service 5544 Last 4 digits of account number Priority Creditor's Name P.O. box 646 When was the debt incurred? 2014 Oak Lawn, IL 60454-0646 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify notice only

4.1 Illinois Emergency Medicine

Official Form 106 E/F

Last 4 digits of account number

2144

16.00

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Case number (if know)

	- Todaina Fioara				
	Priority Creditor's Name po box 366 Hinsdale, IL 60522	When was the debt incurred?	2015		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	■ Other. Specify medical	al bill	_	
4.1	Illinois Tollway	Last 4 digits of account number	5544	\$	0.00
	Priority Creditor's Name PO Box 5201	When was the debt incurred?	2014		
	Lisle, IL 60532 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	_			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	■ Other. Specify collect	ion		
4.1	Internal Revenue Service	Last 4 digits of account number	5544	\$	0.00
<u> </u>	Priority Creditor's Name	-		Ψ	
	P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2014		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	_			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	_	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts		
	☐ Yes				
	∟ res	Other. Specify tax de	<u> </u>	_	

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Debtor 1 Roddrika Heard 4.1 7 1.605.00 Kay Jewelers 544 Last 4 digits of account number Priority Creditor's Name 375 Ghent Rd. When was the debt incurred? 2014 Akron, OH 44333 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify collection 4.1 0.00 NCC Business Services 5774 Last 4 digits of account number 8 Priority Creditor's Name PO Box 23758 When was the debt incurred? 2014 Jacksonville, FL 32241 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes collection Other. Specify 4.1 656.00 Northwestern Medicine 5544 Last 4 digits of account number Priority Creditor's Name 28155 Network Place 2015 When was the debt incurred? Chicago, IL 60673-1281 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

medical bill

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Debtor 1	Roddrika Heard		Document	Page 24 of 52 Case number (if know)	
Debtor	Nodulika Healu				

	The Room Place at Harlem	Last 4 digits of account number	5774	\$	4,500.00
	Priority Creditor's Name 6741 Dempster St. Morton Grove, IL 60053	When was the debt incurred?	2014		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other. Specify collecti	on		
2	University of Phoenix	Last 4 digits of account number	5447	\$	435.00
	Priority Creditor's Name	Last 4 digits of account number		Ψ	
	3157 East Elwood St. Phoenix, AZ 85034	When was the debt incurred?	2015		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	·			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that you did		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify collection	on		
Part 3	List Others to Be Notified About a Del	bt That You Already Listed		_	
is try	this page only if you have others to be notified a ring to collect from you for a debt you owe to so more than one creditor for any of the debts tha ied for any debts in Parts 1 or 2, do not fill out o	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection age	ncy here. Si	milarly, if ັ້yoເ
lame NON		On which entry in Part 1 or F Line of (Check one):	Part2 did you list the original cred Part 1: Creditors with Priority Unse Part 2: Creditors with Nonpriority U	cured Clai	
		Last 4 digits of account num			-1411110

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00

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Debtor 1 Roddrika Heard

	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	12,340.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	12,340.00

			III FAUE / U UI 3/	<i>,</i>
Fill in this infor	mation to identify your	case:		
Debtor 1	Roddrika Heard First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Ni wala a a	04			<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 27 o	ot 52	-
Fill in this	information to identify your	case:			
Debtor 1	Poddrika Hoord				
Debior	Roddrika Heard First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	,,				
Case num	ber				
(if known)					Check if this is an
					amended filing
Officia	l Form 106H				
		ahtara			
Sched	dule H: Your Cod	eptors			12/15
■ No □ Yes 2. With		ı lived in a community pr	operty state or territor	ry? (Community proper	ty states and territories include)
☐ Yes	s. Did your spouse, former spo lumn 1, list all of your codeb e 2 again as a codebtor only	ors. Do not include your f that person is a guaran	spouse as a codebtor	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
out C	olumn 2.		•	•	
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt les that apply:
3.1				☐ Schedule D, lir	20
3.1	Name			Schedule E/F,	
				☐ Schedule G, lii	
<u>.</u>				Scriedule G, III	<u> </u>
	Number Street	Chata	ZID Code		
	City	State	ZIP Code		
3.2				Schedule D, lin	
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lii	ne
-	Number Street				
	City	State	ZIP Code		

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Fill	in this information t	to identify your ca	ase:								
Del	btor 1	Roddrika Hea	ard			_					
	btor 2 buse, if filing)										
Uni	ited States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number							ck if this is An amende A supplement 3 income	ed filing ent showin	g postpetition	chapter
<u>O</u>	<u>fficial Form</u>	<u> 1061</u>					Ī	MM / DD/ Y	YYYY		
S	chedule I:	Your Inco	ome								12/1
atta	ch a separate she	et to this form.	r spouse is not filing wi On the top of any additi					umber (if	known). A		
	Information. If you have more	than one job		■ Employed				☐ Empl		mig opodoo	
	attach a separate information about employers.	page with	Employment status	☐ Not employed					mployed		
			Occupation	Mail Assembler							
	Include part-time, self-employed wo		Employer's name	United States Po	stal Ser	vic	е				
	Occupation may i or homemaker, if		Employer's address	1157 Church St. Northbrook, IL 6	0062						
			How long employed t	here? 1 year				_			
Pai	rt 2: Give De	tails About Mor	thly Income								
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the informatio	n for all e	mp	loyers for	that perso	on on the li	nes below. If	you need
							For De	btor 1		btor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$:3	3,770.00	\$	N/A	
3.	Estimate and lis	t monthly overti	ime pay.		3.	+\$	i	0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	3,7	70.00	\$	N/A	

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Debte	or 1	Roddrika Heard	-	(Case	number (if known)				
					For	Debtor 1		Debtor -filing s		
	Сор	y line 4 here	4.		\$_	3,770.00	\$		N/A	<u> </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	403.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$_	134.33	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	50) .	\$	60.67	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		N/A	_
	5e.	Insurance	5e	€.	\$	136.50	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$_	0.00	\$		N/A	<u> </u>
	5g.	Union dues	50	J.	\$	58.50	\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.00	+ \$		N/A	<u>-</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	793.00	\$		N/A	<u>-</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,977.00	\$		N/A	<u>.</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$_	0.00	\$		N/A	_
	8d.	Unemployment compensation	80	d.	\$_	0.00	\$		N/A	
	8e.	Social Security	86	€.	\$_	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	0.00	\$		N/A	_
	8g.	Pension or retirement income	80		\$_	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h _	1.+	\$_	0.00	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	0.00	\$		N/	A
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		2,977.00 + \$		N/A	= \$	2,977.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,977.00		IN/A	- Ψ	2,911.00
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a second control of the control of	depe			. ,	,	Schedule 11.	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies				,		12.	\$	2,977.00
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes, Explain: Debtor is progrant and due in January 2016, income		11 -2		uda a Dahta 1	4:		month	ly income

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Eill	in this informa	tion to identify yo	our caca:			1		
Deb	otor 1	Roddrika Hea	ard			Ch □	eck if this is: An amended filing	
Deb	otor 2						•	wing postpetition chapter
(Spo	ouse, if filing)					_	13 expenses as of	the following date:
Unit	ted States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLING	DIS		MM / DD / YYYY	
1	se number							
(If k	known)							
Of	fficial Fo	rm 106J				ı		
		J: Your	Exper	ises				12/1
Be info	as complete a complete a compartion. If maken (if know	and accurate as	possible. eded, atta y question	If two married people are ch another sheet to this f				or supplying correct
1.	Is this a joir		illolu					
	■ No. Go to	o line 2. es Debtor 2 live i	in a separa	ate household?				
	□N							
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No □ Yes
								□ No
								□ Yes
								□ No
2	Da		_					☐ Yes
3.	expenses o	penses include f people other to d your depende	han $_{m \Box}$	No Yes				
Par	rt 2: Estim	ate Your Ongoi	na Monthi	v Evnenses				
Est	timate your ex	cpenses as of yo	our bankrı	uptcy filing date unless you y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a s J, check	supplement in a Cha the box at the top o	pter 13 case to report f the form and fill in the
Inc	lude expense	s paid for with	non-cash	government assistance if	vou know			
the		h assistance an		luded it on Schedule I: Y			Your exp	enses
4.	The rental of	or home owners	hin exnen	ses for your residence. In	nclude first mortgage			
٦.		nd any rent for the		-	ioiado mot mortgage	4.	\$	870.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a.	·	0.00
	•	rty, homeowner's	-			4b.	·	0.00
		maintenance, re owner's associat		ıpkeep expenses dominium dues		4c. 4d.	\$ 	65.00 0.00

Additional mortgage payments for your residence, such as home equity loans

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Debtor 1	Roddrika	Heard	Case num	ber (if known)	
6. Uti l	lities:				
6a.	Electricity,	heat, natural gas	6a.	\$	200.00
6b.	Water, sew	er, garbage collection	6b.	\$	120.00
6c.	Telephone	, cell phone, Internet, satellite, and cable services	6c.	\$	50.00
6d.	Other. Spe	cify: Cell Phone	6d.	\$	65.00
Foo	od and house	keeping supplies	7.	\$	410.00
Chi	ildcare and cl	nildren's education costs	8.	\$	0.00
Clo	othing, laundr	y, and dry cleaning	9.	\$	95.00
). Per	rsonal care p	oducts and services	10.	\$	55.00
. Me	dical and den	tal expenses	11.	\$	100.00
. Tra	ansportation.	Include gas, maintenance, bus or train fare.			
	not include ca		12.	·	275.00
B. Ent	tertainment, c	lubs, recreation, newspapers, magazines, an	d books 13.	\$	50.00
. Ch	aritable contr	ibutions and religious donations	14.	\$	0.00
. Ins	surance.				
		surance deducted from your pay or included in lir		_	
	a. Life insurai		15a.	*	0.00
	o. Health insu		15b.	·	0.00
	c. Vehicle ins		15c.		62.00
	d. Other insur		15d.	\$	0.00
		clude taxes deducted from your pay or included in		•	
	ecify:		16.	\$	0.00
		ase payments:	47-	φ	0.00
		nts for Vehicle 1	17a.	·	0.00
		nts for Vehicle 2	17b.		0.00
	c. Other. Spe		17c.	·	0.00
	d. Other. Spe		17d.	\$	0.00
		of alimony, maintenance, and support that you		¢	0.00
		our pay on line 5, Schedule I, Your Income (O you make to support others who do not live was a support others.		\$	
	ecify:	you make to support others who do not live t	19.	Ψ	0.00
		rty expenses not included in lines 4 or 5 of th		ur Incomo	
		on other property	20a.		0.00
	o. Real estate		20b.		0.00
		omeowner's, or renter's insurance	20c.		0.00
		ce, repair, and upkeep expenses	20d.		0.00
		er's association or condominium dues	20d. 20e.	· —	
		er's association or condominium dues		·	0.00
. Otr	her: Specify:		21.	+5	0.00
. Cal	Iculate your n	nonthly expenses			
22a	a. Add lines 4 t	hrough 21.		\$	2,417.00
22b	o. Copy line 22	(monthly expenses for Debtor 2), if any, from Of	ficial Form 106J-2	\$	·
		and 22b. The result is your monthly expenses.		\$	2,417.00
	5. 7 taa iii 10 22a	Tana 225. The recall to your mentally expended.			2,417.00
		nonthly net income.			
		2 (your combined monthly income) from Schedu		·	2,977.00
23b	o. Copy your	monthly expenses from line 22c above.	23b.	-\$	2,417.00
-00	0.14				
230		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	560.00
For mod	example, do yo	n increase or decrease in your expenses with u expect to finish paying for your car loan within the yea erms of your mortgage?			crease or decrease because of a
	ſ	Explain here: When baby arrives in January,	2016 Debtor's expenses	will rise	
	Yes.	Explain here. Which baby allives in January,	ZUTU, DEDIUI S EXPENSES	WIII 1196	

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Fill in this inf	ormation to identify your	case:		
Debtor 1	Roddrika Heard			
	First Name	Middle Name	Last Name	
Debtor 2	-			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Ec	orm 106Dec			
Declara	ation About a	ın Individual	Debtor's Schedules	12/15
If two married	people are filing together	, both are equally respon	nsible for supplying correct information.	
Va	thia farm wharaver was fi		an amounted askedulas Making a falsa atata	
			or amended schedules. Making a false state cruptcy case can result in fines up to \$250,00	
	i. 18 U.S.C. §§ 152, 1341, 1		apicy ouse our result in fines up to \$200,00	o, or imprisorment for up to 20
•	55 , ,	,		
S	ign Below			

Did vou pav	or agree to	pay someone	who is NOT	an attorne	v to help v	vou fill out b	pankruptcy	/ forms?
-------------	-------------	-------------	------------	------------	-------------	----------------	------------	----------

No

. Attach Bankruptcy Petition Preparer's Notice, Declaration, Yes. Name of person and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Roddrika Heard Roddrika Heard Signature of Debtor 1

Signature of Debtor 2

Date December 17, 2015

Date

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Filli	n this inforn	nation to identify you	r case:			
Debt	tor 1	Roddrika Heard First Name	Middle News	LastName		
Debt	tor 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	e number					
(if kno	wn)				_	theck if this is an mended filing
Off	icial Fo	rm 107				
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	12/15
infor	mation. If moer (if knowr	ore space is needed, n). Answer every ques	attach a separate sheet to t	this form. On the top of any	equally responsible for sup radditional pages, write you	
		r current marital statu		21100 201010		
	☐ Married ■ Not mar	ried				
			lived envelope ather then	where you live new?		
2.	During the ia	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	_	ake sure you fill out Sch	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$40,095.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Roddrika Heard

				Dahtani					Dobtos C		
				Debtor 1		_			Debtor 2		
				Sources of Check all	of income that apply.	(befo	ss income ore deductions usions)	and	Sources of inco		Gross income (before deductions and exclusions)
	r last calen inuary 1 to	dar year: December	31, 2014)	■ Wages bonuses,	, commissions, tips		\$43,40	3.00	☐ Wages, combonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a l	business	
		dar year be December		■ Wages bonuses,	, commissions, tips		\$28,35	8.00	☐ Wages, combonuses, tips	missions,	
				☐ Operat	ing a business				☐ Operating a l	ousiness	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	ner that incompensions; reseand you h	ental income; inter nave income that y	amples or rest; divi	of other incomined idends; money eived together,	e are al collect list it or		royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
	⊔ Yes.	Fill in the de	etaiis.								
				Debtor 1 Sources of Describe b		(befo	ss income ore deductions usions)	and	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: List	t Certain Pa	yments You	Made Befo	re You Filed for	Bankru	ptcy				
6.	Are either ☐ No.	Neither Doindividual During the No. Yes	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below 6 paid that cr not include	Debtor 2 has personal, far personal, far personal, far personal, far personal, far personal p	amily, or househo for bankruptcy, di r to whom you pai ot include paymer o an attorney for th	umer de old purpo id you pa id a tota nts for do his bank	ebts. Consume ose." ay any creditor I of \$6,225* or comestic suppo cruptcy case.	a total more ir rt obliga	of \$6,225* or mor	e? ments and th ild support ar	(8) as "incurred by an le total amount you and alimony. Also, do
	Yes.				primarily consu for bankruptcy, di			a total	of \$600 or more?		
		■ No.	Go to line 7	·.							
		☐ Yes	include pay		omestic support o				the total amount yort and alimony. A		creditor. Do not noclude payments to an
	Creditor'	s Name and	d Address		Dates of payme	ent	Total amor	unt aid	Amount you still owe	Was this p	ayment for
7.	Insiders in of which y	iclude your i	elatives; any ficer, director	general part , person in c	tners; relatives of control, or owner of	any ger of 20% o	neral partners; or more of their	partner voting		u are a gener y managing	al partner; corporations agent, including one for
	■ No										
			nents to an in	sider	_					_	
	Insider's	Name and	Address		Dates of payme	ent	Total amou	unt aid	Amount you still owe	Reason for	r this payment

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Debtor 1 Roddrika Heard

8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	ny property on ac	count of a dek	ot that benefited an		
	■ No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to			
Pai	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures						
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	case		
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		erty repossessed, fo	oreclosed, garnis	hed, attached,	seized, or levied?		
	■ No□ Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the		
		Explain what happene	ed			property		
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.		cluding a bank or fin	nancial institution	, set off any an	nounts from your		
	Creditor Name and Address	Describe the action th	e creditor took	Date taken	action was	Amount		
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		erty in the possessi	on of an assigned	e for the benefi	t of creditors, a		
	■ No □ Yes							
Pa	t 5: List Certain Gifts and Contributions	i						
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gif	ts with a total value	of more than \$60	0 per person?			
	Gifts with a total value of more than \$600 per person	Describe the gifts	3	Dates the g	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankru ■ No	ptcy, did you give any gif	ts or contributions v	vith a total value	of more than \$6	600 to any charity		
	\square Yes. Fill in the details for each gift or co	ntribution.						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		u contributed	Dates	s you ibuted	Value		
Pa	t 6: List Certain Losses							

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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	or gambling?				
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Describe any insurance Include the amount that i insurance claims on line	nsurance has paid. List p		value of property lost
Par	t 7: List Certain Payments or Transfers	S			
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.				
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	transferred	Description and value of any property transferred		ent Amount of was payment
	Chang & Carlin, LLP 1305 Remington Road Suite C Schaumburg, IL 60173 jcarlin@changandcarlin.com	\$4000; fee is i	\$4000; fee is in the Chapter 13 Plan; not yet paid at this point		\$0.00
17.	promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.				
	■ No☐ Yes. Fill in the details.				
	Person Who Was Paid Address	Description an transferred	d value of any property	Date payme or transfer made	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.				
	Person Who Received Transfer Address Person's relationship to you	Description an property transf	erred p	Describe any property of ayments received or detailed in exchange	
19.	lithin 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a eneficiary? (These are often called asset-protection devices.)				

■ No

Name of trust

☐ Yes. Fill in the details.

Description and value of the property transferred

Date Transfer was

made

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Debtor 1 Roddrika Heard

Pai	tt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and S	torage Unit	s	
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, a	ny safe dep	oosit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy					
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?
Pa	rt 9: Identify Property You Hold or Control f	for Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pai	rt 10: Give Details About Environmental Info	rmation				
For	the purpose of Part 10, the following definition	ons apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, groun	• .	•	
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or to own, operate, or utilize it, including disposal sites.					e, or utilize it or used	
	Hazardous material means anything an envir hazardous material, pollutant, contaminant,		as a hazardous	s waste, ha	zardous substance, toxi	c substance,
Rep	ort all notices, releases, and proceedings tha	t you know about, rega	ardless of whe	n they occu	ırred.	
24	Has any governmental unit notified you that	vou may be liable or n	otentially liable	under or i	n violation of an environ	mental law?

No

☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

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Der	Roddrika Heard		Cas	se number (# known)			
25.	Have you notified any governmental unit of	any release of hazardous material?					
	No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or add	ministrative proceeding under any envi	ronm	nental law? Include settlements a	and orders.		
	No						
	Yes. Fill in the details.	Count on anomaly	Nat	www. of the coop	Ctatus of the		
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case		
Par	t 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of	the following connections to any	business?		
	☐ A sole proprietor or self-employed i	in a trade, profession, or other activity,	eithe	er full-time or part-time			
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	ip (L	LP)			
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security				
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed			
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	No						
	Yes. Fill in the details below.						
	Name Address	Date Issued					
	(Number, Street, City, State and ZIP Code)						
Par	t 12: Sign Below						
are with	ve read the answers on this <i>Statement of Fin</i> true and correct. I understand that making a nabankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, of	or ob	otaining money or property by fra			
/s/	Roddrika Heard	_					
	ddrika Heard nature of Debtor 1	Signature of Debtor 2					
Dat	December 17, 2015	Date					
Did ■ N	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	Filing	for Bankruptcy (Official Form 10)7)?		
□ Y							
Did ■ N	you pay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy	forms?			
□ Y	es. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration	on, a	nd Signature (Official Form 119).			
Offic	ial Form 107 Statem	nent of Financial Affairs for Individuals Filing	g for E	Bankruptcy	page		

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Debtor 1 Roddrika Heard

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:December 17, 2015	
Signed:	
/s/ Roddrika Heard	/s/ John P. Carlin
Roddrika Heard	John P. Carlin 6277222
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amounts are	blank. Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	e _ Roddrika Heard		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENSAT	TION OF ATTORN	EY FOR DE	EBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and to compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for service be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	4,000.00	
2.	\$_310.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
_	The state of the s	of the second	1 4	· · · · · · · · · · · · · · · · · · ·	
5.	■ I have not agreed to share the above-disclosed compensation	on with any other person uni	less they are mem	bers and associates of my law iirm.	
	☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of				
6.	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspects o	f the bankruptcy (case, including:	
	a. [Other provisions as needed] Negotiations with secured creditors to reduce to ragreements and applications as needed; prepara of liens on household goods.				
7.	7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.				
	CEI	RTIFICATION			
	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.	ement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in	
Г	December 17, 2015	/s/ John P. Carlin			
I	Date	John P. Carlin 627722	22		
		Signature of Attorney John Carlin			
		1305 Remington Roa	ıd		
		Suite C Schaumburg, IL 6017	73		
		847-843-8600 Fax: 8	847-843-8605		
		jcarlin@changandcarl Name of law firm	lin.com		

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United States Bankruptcy Court Northern District of Illinois

In re	Roddrika Heard		Case No.	
		Debtor(s)	Chapter 13	
	VEDI	FICATION OF CREDITOR M	ATDIY	
	V LXII	TICATION OF CREDITOR WI	AIKIA	
		Number of	Creditors:	22
	The above-named Debtor(s) her (our) knowledge.	reby verifies that the list of credit	ors is true and correct to	the best of my
Date:	December 17, 2015	/s/ Roddrika Heard		
		Roddrika Heard Signature of Debtor		

A/R Concepts, Inc. 18-3 E. Dundee Road Suite 330 Barrington, IL 60010

Adventist Health Partners PO Box 7001 Bolingbrook, IL 60440

Adventist Hinsdale Hospital PO Box 9247 Hinsdale, IL 60522

advocate lutheran general 175 dempster st Park Ridge, IL 60068

Advocate Medical Group 75 Remittance Dr. Suite 1019 Chicago, IL 60675

Arnold Scott Harris PC 222 Merchandise Mart Suite 1932 Chicago, IL 60654

City of Chicago- Dept of Rev PO Box 88292 Chicago, IL 60680

CMRE Financial Services, Inc. 3075 E. Imperial Hwy #200 Brea, CA 92821

Elmhurst Emergency Med Srvs PO Box 366 Hinsdale, IL 60522

Elmhurst Memorial Healthcare PO Box 92348 Chicago, IL 60675

Gateway Financial PO Box 3257 Saginaw, MI 48605 Healthlab 25 N. Winfield Rd. Winfield, IL 60190

Ilinois Dept. of Revenue 100 W. Randolph st Chicago, IL 60601

Illinois Collection Service P.O. box 646 Oak Lawn, IL 60454-0646

Illinois Emergency Medicine po box 366 Hinsdale, IL 60522

Illinois Tollway PO Box 5201 Lisle, IL 60532

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Kay Jewelers 375 Ghent Rd. Akron, OH 44333

NCC Business Services PO Box 23758 Jacksonville, FL 32241

Northwestern Medicine 28155 Network Place Chicago, IL 60673-1281

The Room Place at Harlem 6741 Dempster St. Morton Grove, IL 60053

University of Phoenix 3157 East Elwood St. Phoenix, AZ 85034